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ABSTRACT

This Kids Count report examines statewide trends in the well-being of South Carolina's children. The statistical portrait is based on 42 indicators in the areas of demographics, family, economic status, health, readiness and early school performance, scholastic achievement, and adolescent risk behaviors. The indicators are: (1) population; (2) births to teen mothers; (3) births to mothers not completing high school; (4) births to single mothers; (5) divorce rate; (6) single-parent family; (7) parents working; (8) abuse and neglect; (9) family violence; (10) separation from parents; (11) out of home placements; (12) adult/child ratio; (13) poverty; (14) barriers to self-sufficiency; (15) income; (16) child support payments; (17) prenatal care; (18) low birth weight; (19) infant mortality; (20) childhood injuries and deaths; (21) immunization; (22) sexually transmitted diseases; (23) healthy lifestyles; (24) tobacco use; (25) disabilities; (26) emotional and behavioral disorders; (27) inadequate health care; (28) ambulatory care; (29) first-grade readiness; (30) first- through third-grade failure rates; (31) overage for grade three; (32) special education; (33) achievement trends; (34) Palmetto Achievement Challenge Test; (35) dropout rates; (36) adolescents not in school or employed; (37) sexual activity and pregnancy; (38) alcohol use; (39) heavy drinking; (40) drug use; (41) juvenile delinquency; and (42) adolescent deaths. Statewide data and summary information are provided for each indicator. Thirteen tables are included and summarize specific indicator information. The report's findings indicate that too many children are at risk of not growing up to become self-supporting adults, with 25.1% in single-parent families, 21% in poverty, 33.4% not

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graduating from school, 37.4% of high school students using alcohol, and 19.6% using drugs each month. (SD)

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South Carolina Kids Count, 2001

A. Baron Holmes

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Demographics

In 1999 there were an estimated 961,400 children under age 18 in the state. Of these, 600,300 were White, 348,000 were African-American, and 13,100 were other races. There were 941,966 children under age 18 in 1980, 955,163 in 1970, and 992,476 in 1960.

Children represent a shrinking portion of the state's population. Those under 18 constituted 24.7% of the population in 1999, down from 41.7% in 1960, 36.9% in 1970 and 30.2% in 1980.

In 1999 the 307,500 pre-schoolers under age 6 were 7.9% of the overall population: 7.4% of Whites and 9.1% of African Americans.

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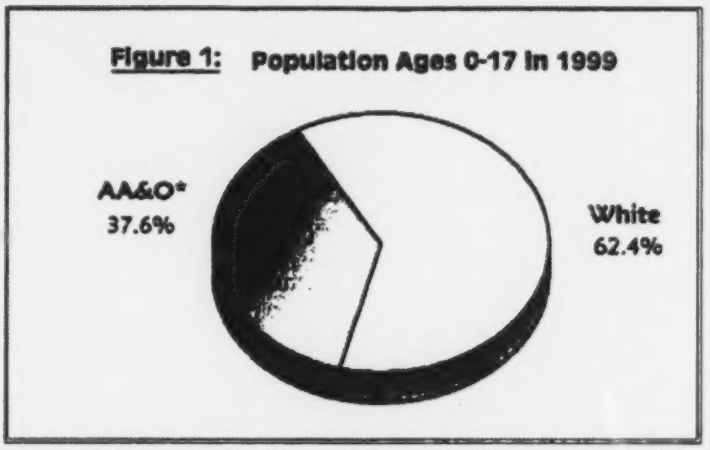

* In all charts African-American is combined with other races, and abbreviated as AA&O. Other races comprise 1.4% of children in the state.

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Family

Families have always been the most important influence in a child's life. Children depend on their families for material needs, stimulation and guidance. Family life is different in numerous ways from previous generations, and many families now face exceptional challenges.

Families with children now make up a smaller share of all households. Only 35.5% of all households in 1990, as compared with 49.0% of households in 1960, had children below the age of 18.

Births to Teen Mothers: In 1998, 3,453 babies were born to mothers younger than age 18. They were 6.4% of all babies born in the state; 4.4% of all White and 9.9% of all African-American and Other babies were born to teen mothers under the age of 18. Of the babies born to these teens in 1998, 91.1% were born to single mothers, including babies whose fathers formally acknowledged paternity but had not married the mothers.

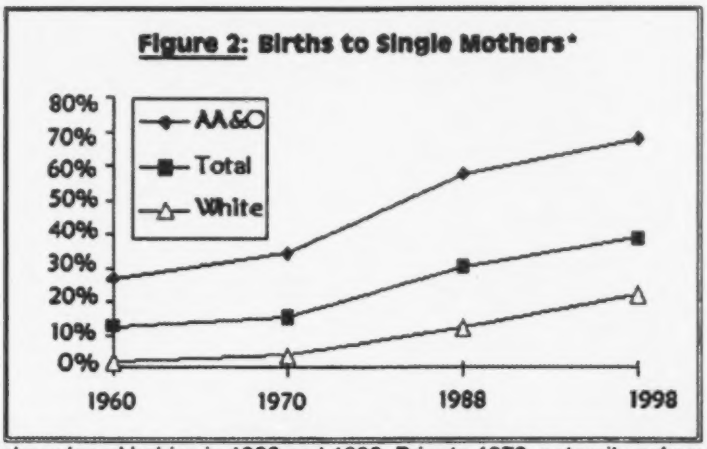
In 1998, 8,617 babies were born to mothers younger than age 20. These babies were 16.0% of all born in the state; 12.0% of all White and 22.9% of all African-American and Other babies were born to mothers under the age of 20. Of the babies born to these mothers in 1998, 82.9% were born to single mothers, including paternity acknowledeged babies.

Births to Mothers Not Completing High School: Children's success is strongly influenced by the education of their parents. In 1998, 11,297 babies, 21.0% of all babies, were born to mothers of all ages who had not completed the 12th grade. In 1998, 18.4% of White and 25.4% of African-American and Other babies were born to mothers who had completed less than the 12th grade. This is a substantial improvement from 44.6% in 1970.

Births to Single Mothers: Births to single mothers have increased steadily over four decades. In 1998, 14,802 babies, 27.5% of all babies, were born to single mothers. A decade earlier in 1988, the percentage was 27.1% and in 1960 it was 12.3%. In 1998, 12.8% of White

children and 52.8% of African-American and Other children were born to single mothers.

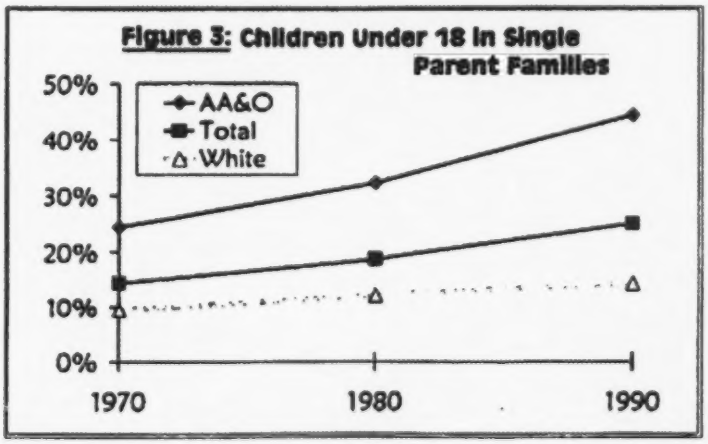
To these numbers should be added an additional group of 6,089 babies, 11.3% of all born in 1998, whose fathers formally acknowledged paternity but had not married the mothers. When the paternity-acknowledged babies are added, the total number born to single mothers in 1998 was 20,891, constituting 38.8% of all babies, 22.0% of White babies, and 67.8% of African-American and Others.



*Includes paternity acknowleged babies in 1988 and 1998. Prior to 1979, paternity acknowlegement was not a statistical category.
These babies were included in births to single mothers.

Divorce Rate: In 1998, 42,380 marriage licenses were issued, while 15,083 divorce decrees involving 12,158 children were filed. In 1970, only 6,741 children were in families involved in divorce.

Single-Parent Family: Increasing numbers of children live in single-parent families. In 1990, 200,590 children lived with only one parent. This was 25.1% of all children, up from 18.9% in 1980 and 14.5% in 1970. In 1990, 14.5% of White and 44.6% of African-American and Other children lived in single-parent families. Also in 1990, 57,567 or 22.3% of children under age 6 lived in single parent families: 11.2% of White and 44.8% of African American and Other pre-schoolers.



Parents Working: Increasingly, parents must divide their time between children and employers. In order to meet family financial needs, most parents must work and thus have less time for family life. In 1990, 66.5% of mothers with children under 6 and 78.0% with children 6 - 17 were in the labor force. This has increased substantially from 1960 when 36.8% of mothers with children under 6 were in the labor force. Most fathers also work: 63.7% of children under 6 are in families where both parents or the single parent work; 38.4% of children under 6 have both their parents or their single parent working 35 hours or more. Caring for children is a problem for parents unable to obtain quality, affordable daycare while they are at work.

Abuse and Neglect: In 1999-2000, there were 18,635[1] investigations into reported cases of abuse and neglect involving children. Through its investigations, the Department of Social Services (DSS) determined that 7,067 of the investigations were indicated for abuse or neglect: 13.7% for physical abuse, 6.6% for sexual abuse, 0.5% for mental injury, 33.1% for physical neglect, 6.3% were for educational neglect, 3.8% were for medical neglect, and 36.1% for threat of harm for physical/sexual abuse.

In the indicated cases of abuse and neglect, DSS determined there were 9,836 children that were victims of abuse or neglect. Of these 48.7% were male, 51.3% were female; 52.1% were White, 47.9% were African-American and Other. By age, 38.9% were ages 0 - 5, 41.3% were ages 6 - 12, and 19.7% were ages 13 - 17. In the indicated cases, 30.3% of the children lived in two-parent families, 48.3% in single parent families, 15.9% with unmarried couples, and 5.6% in other circumstances.

Family Violence: In 1999, 35,654 domestic assaults were recorded by law enforcement officials. These domestic assaults comprised 31.1% of all assaults, which include aggravated assaults, simple assaults, and intimidation. Overall, 56.4% of all domestic assaults involve spouse abuse which constitutes 17.6% of all assaults. Since most family violence is not reported, the true incidence of family disruption is much more widespread than even the large number of reported cases would indicate.

Separation from Parents: Some children do not live with their natural parents. In 1990, 5.1% of all children did not live with their natural parents. Of these, 31,302, or 3.4% of children lived with relatives, 12,231 or 1.3% lived with non-relatives, and 3,615 were in institutional facilities.

Out of Home Placements: As of June 2000, 4,650 children lived in foster care. The median age at first placement in the state is 7.5 years. The ages of children in foster care were 15.1% 0-2, 11.5% 3-5, 23.3% 6-10, 16.6% 11-13, and 33.6% 14 and above. The foster care population is 50.7% males and 49.3% females. Regarding their future, 32.5% were under a plan for placement in adoptive homes, 41.4% for return to a parent or guardian, 2.7% for placement with a relative, 8.9% for independent living, 14.3% for permanent foster care, and 0.1% for other circumstances.

Adult/Child Ratio: A measure of potential adult attention for children from family and community is the ratio of adults to children and youth. In 1999 there were 3.04 adults for every person below age 18. This was up substantially from 1960, when there were only 1.40 adults for every person under the age 18. This indicates that today there are more adults potentially available to provide attention and care for each child than in the past.

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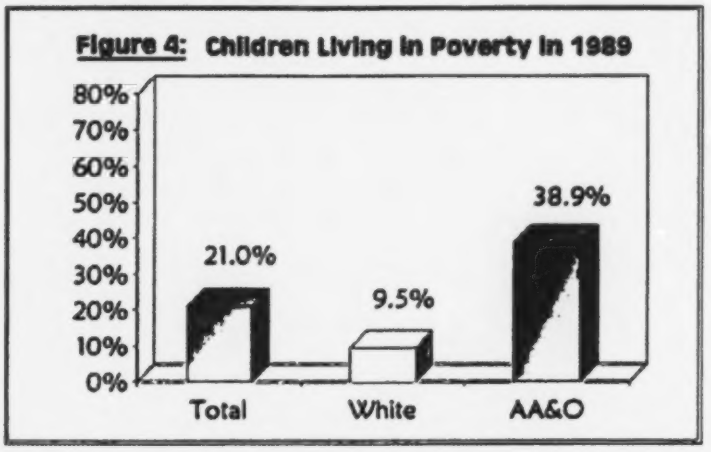
Economic Status

Low income makes it difficult for many families to provide the material and environmental enrichment necessary for healthy child development.

Poverty: In 1989, 190,873 children and youth under the age of 18 lived in 83,423 families with incomes below poverty. Over 21.0% of all children and youth lived below poverty: 9.5% of Whites and 38.9% of African-Americans and Others. A rough estimate of child poverty in 1997 calculated by the Census Bureau was 23.0%.



Poverty has always been a serious problem. While the rate among children under age 18 in 1989 was 21.0%, it was 21.2% in 1979 and 28.7% in 1969.

Children and the elderly are the age groups most seriously affected by poverty. In 1989, 22.6% of children 0 - 5 (10.6% White, 42.1% African-American and Other), and 20.2% of children 6 - 17 (8.9% White, 37.4% African-American and Other), lived in poverty; 20.5% of persons 65 years and older lived in poverty. Historically, the poverty rate among the elderly was much higher. During the last two decades, federal policy actions have substantially improved the economic status of older persons but have not done so for children.

Single-parent families are most likely to be poor. In 1989, 50.0% of children in single-parent families lived in poverty, but only 9.3% of children in married-couple families were poor. Children in single-parent families made up 67.0% of all the state's children living in poverty.

In 2001, the poverty level was $14,630 for a family of three and $17,650 for a family of four. The poverty threshold is often criticized as an arbitrary number. People can still be poor but may be just above the poverty level. Federal programs utilize varying thresholds. For example, in 1989 there were 247,685 children ages 0-17 who were less than 125 percent of poverty; thus an additional 56,812 children were just above the poverty level but could still be

considered poor.

Percent of Children under 18 in Poverty						
	White		African American & Other		Total	
Poverty	Number	Percent	Number	Percent	Number	Percent
Under 50%	21,898	4.0%	71,603	20.1%	93,501	10.3%
Under 100%	52,430	9.5%	138,443	38.9%	190,873	21.0%
Under 125%	77,388	14.0%	170,297	47.9%	247,685	27.2%
Under 150%	104,488	18.9%	199,594	56.1%	304,082	33.4%
Under 175%	138,155	24.9%	227,229	63.9%	365,384	40.2%
Under 185%	151,235	27.3%	237,239	66.7%	388,474	42.7%
Under 200%	171,548	31.0%	249,762	70.2%	421,310	46.3%
Total Children	554,000	-	355,732	-	909,732	-

Barriers to Self-Sufficiency: Poverty often traps families in dependency. Many poor families face barriers, such as lack of transportation or a phone, that prevent them from becoming self-sufficient. During 1990, 10.9% of households did not have a car: 5.7% of Whites and 25.1% of African-Americans and Others. This issue becomes more critical in rural areas where there is little or no public transportation available. Approximately 9.1% of all households did not have a telephone. This is more often a problem in renter-occupied housing units where 19.0% of households had no phone.

Income: The mean income of families with children in 1989 was $35,561. In 1979, it had been $33,061, adjusted for inflation (i.e., in 1989 dollars). The mean income of single-parent families with children was $15,548 in 1989, as compared with $41,991 in married-couple families with children. From 1989 to 1998, state real dollar per capita income (eliminating inflation) increased by 14.7%.

Child Support Payments: There were 30,981[2] families receiving Temporary Aid to Needy Families in fiscal year 2000, but only 21.6 % had child support court orders. Their average monthly payment of child support was $224.64, including child support receipts and tax refund intercepts. In addition, during fiscal year 2000, an estimated 75,742 parents in non-TANF families were obligated to pay a monthly average of $213.29. Information is not available regarding the amount actually paid.

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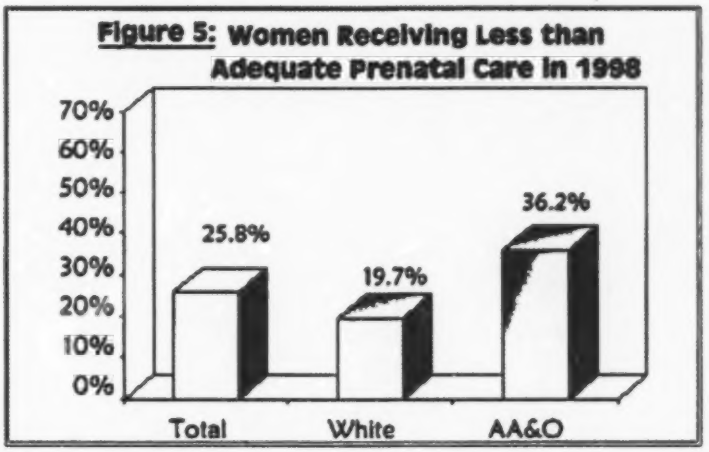
Health

Good health during a child's formative years helps children to reach their maximum potential. Good health requires healthy lifestyles and effective primary care, starting during the prenatal period and continuing through adolescence into adulthood. Children's health reflects the well-being of the community, as well as how adequately they are protected.

Prenatal Care: Early and continuous prenatal care can make a significant difference in assuring births of healthy babies. Delayed or insufficient prenatal care is associated with low birthweight and other health risks for infants. In 1998, 9,859, or 18.3% of pregnant women received no prenatal care in the first three months of pregnancy. In 1998, 13,867, or 25.8% of pregnant women received less than adequate prenatal care: 6,713 or 19.7% of Whites and 7,149 or 36.2% of African-Americans and Others. In that same year, 596 women received no prenatal care at all.



Low Birthweight: Low birthweight of less than 5.5 pounds and very low birthweight of less than 3.3 pounds are associated with health risks and growth and development problems. In 1998, 5,142 or 9.6% of all babies in the state were born with low birthweight: 13.8% of African-American and Other babies and 7.1% of White babies. During 1996-98, approximately 3,007 or 1.9% of all babies were born with very low birthweight and had the most serious complications: 1.2% of White babies and 3.1% of African-American and Other babies.

Infant Mortality: During the decade since 1986-88, the overall infant mortality rate decreased by 28.5% from 12.7 to 9.1 per 1000 live births. For Whites, the rate decreased 38.9% from 9.7 to 5.9 per 1000 live births, while for African-Americans and Others the rate decreased 16.5% from 17.4 to 14.5. Over the three-year period 1996-98, 590 White and 839 African-American and Other infants died before age one. By comparison, 943 White and 1,088 African-American and Other infants died during 1986-88.

Child Injuries and Deaths: Childhood deaths and injuries reflect whether communities are safe for children. In 1999, children in the state went to the emergency room 106,988 times because of injuries. Boys are injured more often than girls. Children visit the emergency room at comparable rates for each age from 0 to 17.

In South Carolina, the major causes of death among young children are unintentional injuries, cancer, homicide, and congenital anomalies. Over the three year period 1996-98, 335 White and 365 African-American and Other children ages 1-14 died in the state. During 1986-88, 471 White and 431 African-American and Other children died.

Immunization: Immunization rates are an important indication of whether young children are receiving adequate preventive health care. During FY 1989-90, 52.1% of children less than two years old seen in public health clinics were not fully immunized against such preventable

diseases as Polio, Measles, Diphtheria, Tetanus, Haemophilus Influenza B and Whooping Cough. After a concerted statewide campaign to increase immunizations, the percentage of children seen in public health clinics who were not fully immunized in 2000 had declined in the state to 11%. The DHEC statewide birth registry survey of all two year old children found that 89.0% were fully immunized in 1999. This success demonstrates the potential to improve the status of children when the leadership of the state and its communities act decisively together.

Sexually Transmitted Diseases: Children and youth are infected with sexually transmitted diseases through sexual abuse or irresponsible sexual activity. National prevalence rates indicate: a 1 in 8 chance that sexually active 15 year-old girls will develop pelvic inflammatory disease (PID), the most rapidly increasing cause of infertility; 10-29% of sexually active adolescent girls and 10% of sexually active teen boys are infected with chlamydia, the most common cause of PID; and as many as 15% of teen girls are infected with human papilloma virus, often with strains linked to cervical cancer. Furthermore, research evidence indicates that susceptibility to HIV/AIDS increases by 3 to 8 times through prior infection with various STDs.

According to national studies, approximately 1 in 4 sexually experienced youth aged 13-19 acquires a STD every year; since two-thirds of all high school students have had sexual intercourse and half engage in intercourse over a three month period, this would suggest that 10-15% of teens are infected with STDs annually. For 1999, this would indicate that an estimated 39,070 to 58,605 youth ages 13-19 in the state were infected with a STD. Many infections are either not identified for treatment or not reported. In the state, there were 175 reported cases of children under age 15 and 2,655 youth ages 15 - 19 infected with gonorrhea; 319 youth under 15 and 5,992 ages 15 - 19 were reported infected with chlamydia. Youth with undiagnosed and untreated STDs often spread their infections.

Healthy Lifestyles: The Youth Risk Behavior Survey in 1999 found that many high school students are not following good health habits. The YRBS revealed that 28% felt that they were overweight; 40% were trying to lose weight: 26% of boys and 54% of girls. Although during a week 79% of high school students ate fruit, 57% ate salad, and over 82% ate vegetables, only 18% ate the recommended five or more servings of fruit and vegetables per day. During a week, 47% did stretching or muscle strengthening exercises, and 55% exercised in sports for 20 minutes three or more times that made them sweat or breathe hard.

Tobacco Use: Cigarette smoking starts at a young age and often becomes habitual. In 1992-93 among students 15 and older, 13.8% first smoked by age 11, 30.8% by age 13, and 42.7% by age 15. In a typical month, 14.7% of 7th and 8th graders and 23.1% of high school students smoked cigarettes. White youths were much more likely than African-Americans to smoke: 29.2% of White 7th to 12th graders used cigarettes, in comparison with 6.6% of African-Americans. A smaller but significant group of high school students (8.2%) used smokeless tobacco monthly; it was used primarily by White males (23.1% compared with 2.3% of all other race and sex groups). Since the 1992-93 survey, the YRBS indicates that monthly cigarette smoking among high school students increased statewide from 27% in 1993 to 39% in 1997 and declined to 36% in 1999, still a one-third increase over 1992-93 rates. The YRBS showed that statewide among high school students in 1999, 45% of White males, 47% of White females, 27% of African-American males and 19% of African-American females smoked during a month.

Disabilities: No data are collected on the true prevalence of disabilities within the state. According to nationally reported estimates, over 10% of children and youth have

developmental disabilities at any point in time, and more than 17% are affected at some time before age 18 by deafness, blindness, epilepsy, cerebral palsy, speech defects, developmental delays, learning disabilities, and emotional or behavioral problems. For 1999 this suggests that at least 96,140 children and youth under age 18 in the state are currently affected by disabilities.

Approximately 5% children and youth nationally have serious disabilities which have lifelong implications for work, social life and community living. Typically among children and youth, there are 1 - 2% who are mentally retarded, 2 - 3% with serious emotional disturbances, over 1% with orthopedic or multiple disabilities, including cerebral palsy and many hereditary conditions, and under 1% with visual or hearing impairments.

Other chronic health problems also affect the lives of many children. Over 3% of children have one or more of these limitations. Such serious chronic conditions affect 1 - 2% who have respiratory problems (asthma, chronic bronchitis), 0.5 - 1.0% with neurologic problems (epilepsy and seizures), and less than 1% with circulatory problems (congenital heart defects and acquired diseases).

Other disabilities are identified primarily in school performance. These would include 40,804 students in grades 1-12 with learning disabilities and 21,192 students in grades 1-12 with speech/language deficits.

Disabilities are caused by genetics, disease, poor prenatal conditions, injuries, and environmental factors. For example, lead exposure, primarily from paint dust, was detected in over 1% of all children screened, including 422 from South Carolina.

Emotional and Behavioral Disorders: While over 20% of 9-17 year olds meet diagnostic criteria for some form of mental disorder, the number with serious emotional disturbance and impaired functioning in family, school, or community activities is: 9-13% for substantial functional impairment and 5-9% for extreme functional impairment. The rates are much higher among poor children. Based on a federal formula for estimating prevalence, in the state there are 12 % or 58,224 seriously emotionally disturbed 9-17 year olds with substantial functional impairment and 8% or 38,816 with extreme functional impairment during the course of one year. Conduct disorders, attention deficit, depression, and anxiety disorders are the most prevalent, affecting 3% or more of school-aged children. These disorders may occur simultaneously in a child. The prevalence rates are highest among males, adolescents, and disadvantaged persons in communities under stress and lacking social cohesion; depression, however, is more prevalent among females. On the YRBS, 20% of boys and 33% of girls in high school reported that during the past year they felt so sad and hopeless almost every day for two weeks or more that they stopped doing some usual activities. Another indicator of emotional problems is the 8% of high school students in South Carolina who reported that they had "attempted suicide" in the past year: 5% of boys and 10% of girls. Suicide attempts resulted in 4% of high school students reporting that they required treatment by a doctor or nurse for injury, poisoning, or overdose.

Inadequate Healthcare: No county level data is routinely collected regarding the number of children and youth with inadequate healthcare. According to estimates by the Bureau of the Census through the annual Current Population Survey, an average of 19.4% or 186,512 children and youth under age 18 in South Carolina had no health insurance coverage in 1999. The number lacking basic accessible primary care is at least double the number lacking insurance. Those lacking primary care are often dependent on health services at school. The

ratio of students to nurses recommended nationally is 750 : 1. In the state, this would suggest the need for 875 nurses, 555 are currently available.

Ambulatory Care: When children lack adequate primary care, whether through lack of insurance, through limited access, or through failing to utilize available care, preventable and treatable conditions become serious and require hospitalization. A useful indicator of inadequate primary care is the percentage of all hospitalizations that could typically have been avoided through ambulatory care, especially for pneumonia, asthma, diarrhea and vomiting, dehydration, and severe ear, nose, and throat infections. The share of hospitalizations for these types of conditions could normally be kept below 20%; for children in the state under the age of 18 during 1999, the share was 30.7% for Whites and 35.7% for African-Americans and Others.

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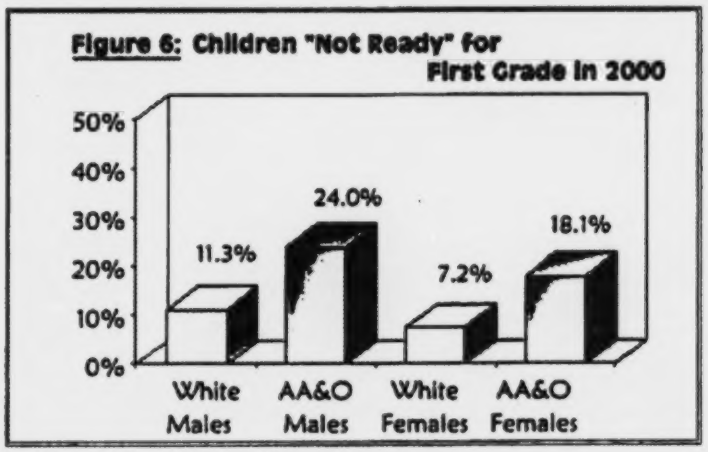
Readiness and Early School Performance

Too many children reach school without the readiness skills needed for success in learning, such as language skills, visual and auditory discrimination, memory recall, and knowledge of colors, letters, numbers, names of objects, etc. Likewise, some schools are not ready to respond appropriately to the varying developmental levels of children in the early grades. As a result, too many students do not experience the success needed to create the motivation and engagement that sustain learning.

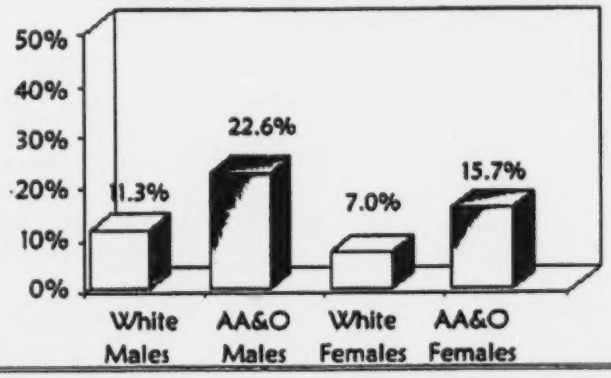
1st Grade "Readiness" on 2000/2001 Cognitive Skills Assessment Battery (CSAB):	
7,498 children not ready	14.8% children not ready



1st Grade Failures in 2000:	
3,754 children failing	6.9% children failing

Failures Grades 1-3 in 2000 (Approximate cumulative perentage of grades one, two and three):	
7,227 children failing	13.6% children failing

Figure 7: Failures Grades 1-3 in 2000



Overage for Grade 3 in 2000	
7,410 children overage	14.5% children overage

Special Education: Large numbers of children are placed in special education classes. In elementary school, 15,777 six and seven year olds and 17,935 eight and nine year-olds were enrolled in special education classes during 1999-2000, approximately 15.8% and 16.8% of their age groups respectively.

Readiness Summary: A serious problem exists in terms of student readiness and school success in the early grades. With 14.8% assessed not ready for the 1st grade, 14.5% overage in grade 3, and 16.8% of eight and nine year-olds placed in special education, unacceptably large numbers of students begin school without good prospects of success in future school achievement and graduation; however, great improvement has occurred since the mid 1990s.

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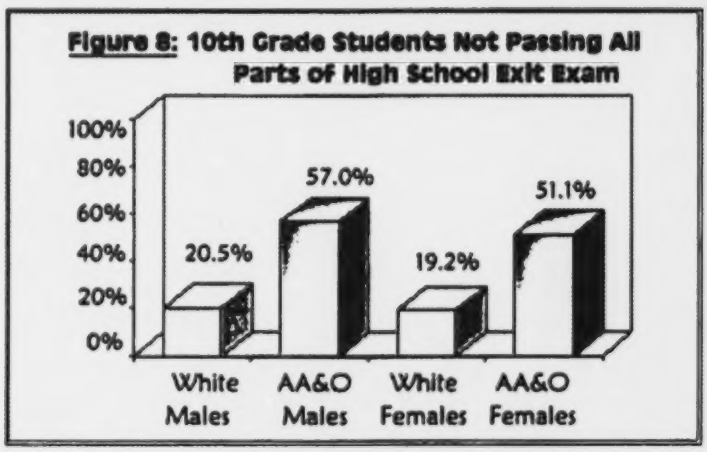
Scholastic Achievement

By the end of elementary school, significant numbers of students perform below minimum

standards. The following standardized test measures, comparing student performance to state minimum standards, should be used in combination with routine classroom assessments more reflective of real-world performance skills.

Special Education: Special education placements reflect both the significant number of children with serious handicapping conditions and an even greater number of students with mild learning and behavioral problems that have not been accommodated successfully by the regular educational program. The result is a large system of self-contained, resource, and itinerant services to meet the needs of 21,192 speech and language impaired, 40,804 learning disabled, 5,893 emotionally disabled, 17,274 mentally impaired, and 16,319 physically handicapped, deaf, blind, and other handicapped students. Special education classes served approximately 15.6% of all students in grades 1 - 12 during 1999-2000.

Exit Exam	
- not passing all parts of Exit Exam on first attempt in the 10th grade in 1999	
14,268 students did not pass all parts	36.4% of students did not pass all parts



Achievement Trends: How has performance on standardized achievement tests changed over the past 15 years? During the 1980s, student performance on the BSAP tests improved dramatically. Between 1981 and 1990, the percentage of 8th grade students in the South Carolina who did not meet standards declined from 57.4% to 27.5% in math and from 49.1% to 23.0% in reading. During the 1990's the BSAP trend changed, with 35.0% not meeting 8th grade math standards in 1998 and 31.6% in reading. On standardized tests, the first year when South Carolina students take the exam is comparable to the challenge encountered by the national norm group which took the test only once. Looking at first year data, the percentage of 4th grade students at or below the 25th percentile of national norms was 28.2% in 1983 on the CTBS, 31.4% in 1990 on the Stanford, and 30.6% in 1995 on the Metropolitan; for 9th graders, the percentage in the bottom quarter was 31.7% in 1990 and 29.5% in 1995.

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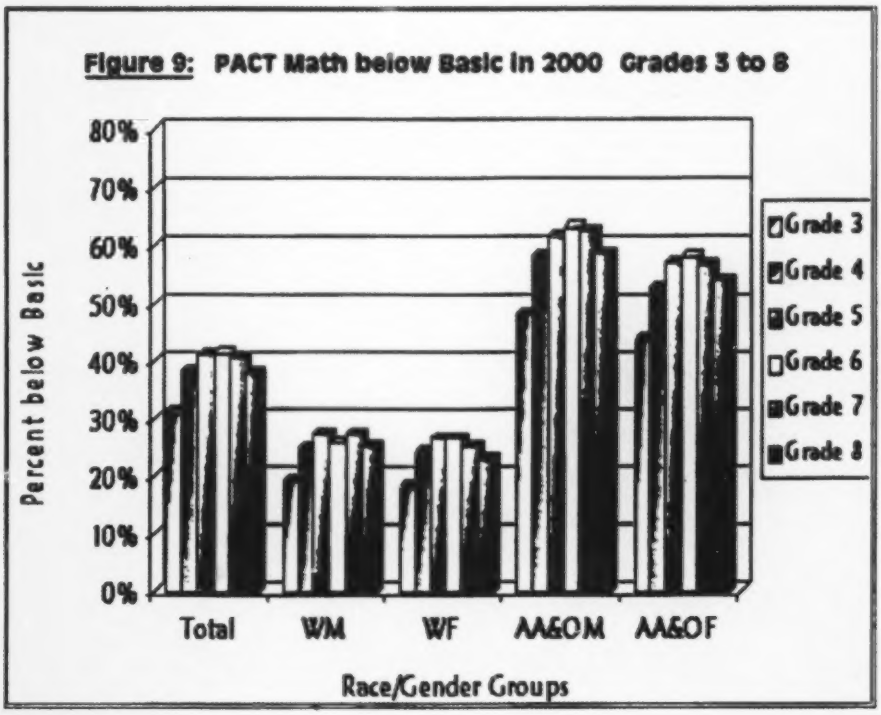
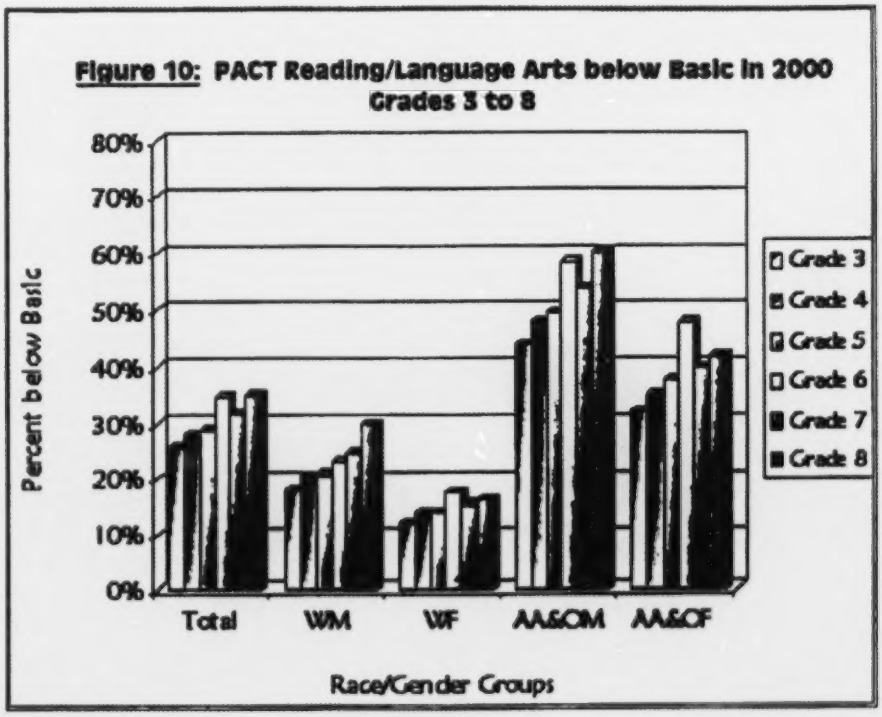
Palmetto Achievement Challenge Test

The Palmetto Achievement Challenge Test (PACT) was first administered in 1999 for grades 3-8 in math and reading/language arts. MATH assesses skills in numbers, numerical and algebraic concepts,patterns and functions, geometry, measurement, probability and statistics.

READING/LANGUAGE ARTS assesses reading, listening, speaking, writing, research, and communication with technology. The first PACT assessment found a high percentage of elementary and middle grades students performing below standards and only a modest number above basic.



Test Results of Students on PACT in 2000							
Math (%)							
Test Result	Grade	Total	WM	WF	AA&OM	AA&OF	Total (1999)
Below Basic	3	31.0	19.1	18.1	48.4	43.9	44.0
	4	38.4	24.9	24.4	58.4	52.8	45.0
	5	41.3	27.6	26.7	61.7	57.0	47.0
	6	41.4	25.8	26.8	63.1	58.1	47.0
	7	40.9	27.6	25.3	62.5	56.7	48.0
	8	38.0	25.3	23.1	58.7	54.1	49.0
Basic	3	43.5	43.1	46.1	40.6	43.9	38.0
	4	38.0	39.9	42.2	32.0	36.4	37.0
	5	38.8	41.9	44.7	31.1	35.0	37.0
	6	36.0	39.5	40.9	28.7	32.7	37.0
	7	37.4	40.3	43.7	29.6	33.1	36.0
	8	42.3	45.1	48.6	34.4	38.3	36.0
Proficient	3	16.0	22.7	21.5	8.0	9.3	13.0
	4	15.6	22.0	22.0	7.1	8.3	13.0
	5	12.2	17.2	17.9	5.1	5.9	12.0
	6	15.1	21.7	21.8	6.1	7.2	11.0
	7	13.0	17.8	18.4	5.4	7.5	11.0
	8	13.1	18.5	19.1	5.0	5.8	10.0
Advanced	3	9.4	15.1	14.3	2.9	3.0	5.0
	4	8.0	13.1	11.5	2.6	2.4	5.0
	5	7.7	13.3	10.7	2.1	2.1	4.0
	6	7.4	12.9	10.5	2.0	2.0	5.0
	7	8.8	14.3	12.6	2.5	2.8	5.0
	8	6.6	11.1	9.2	2.0	1.8	5.0



Reading/Language Arts (%)							
Test Result	Grade	Total	WM	WF	AA&OM	AA&OF	Total (1999)
Below Basic	3	25.6	18.1	12.0	44.2	32.2	35.0
	4	28.0	20.6	13.8	48.1	35.0	35.0
	5	28.9	20.8	13.9	49.6	37.7	35.0
	6	34.8	23.1	17.7	58.6	48.0	37.0
	7	31.9	24.7	15.5	54.3	40.1	37.0
	8	35.1	29.8	16.5	60.5	42.1	38.0
Basic	3	34.4	32.6	30.2	35.3	40.8	37.0
	4	35.1	35.5	30.8	35.2	39.7	37.0
	5	43.8	43.8	43.4	40.7	47.6	39.0
	6	33.3	35.2	32.8	29.8	34.8	39.0
	7	40.8	42.3	40.8	36.0	43.4	39.0
	8	41.3	44.3	42.2	33.0	43.7	41.0
	3	36.0	44.8	49.5	19.5	25.8	26.0
	4	33.0	39.6	47.4	15.9	23.6	26.0
	5	25.0	32.7	38.2	9.4	14.2	24.0
	6	25.1	33.0	36.4	10.3	15.2	21.0
	7	23.4	28.3	35.9	9.1	15.1	21.0

Proficient	8	20.0	22.6	33.5	5.8	13.0	19.0
	3	4.0	4.5	8.3	1.0	1.2	2.0
	4	3.9	4.3	7.9	0.8	1.7	2.0
	5	2.2	2.7	4.5	0.3	0.6	2.0
	6	6.8	8.6	13.2	1.3	2.1	3.0
	7	4.0	4.8	7.7	0.7	1.4	3.0
Advanced	8	3.5	3.2	7.8	0.7	1.2	3.0

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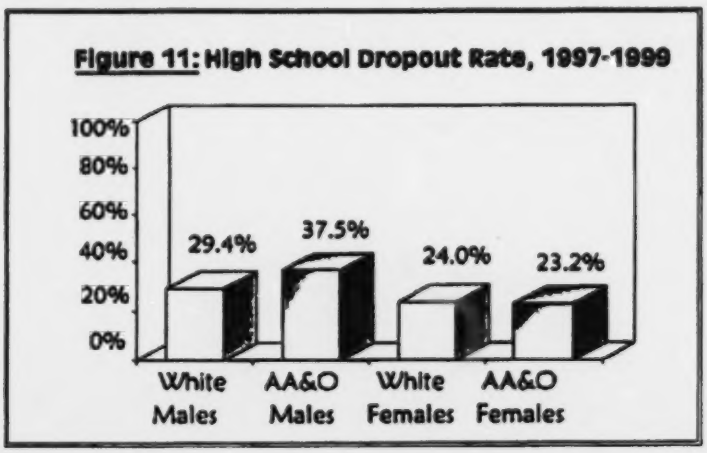
Dropout Rate 8th grade students no longer enrolled in grade 12 (Average of students for the four years ending 1997-99)	
14,555 students drop out annually	28.3% students drop out*

* This dropout rate is calculated, using 8th to 12th grade enrollment data.



Dropouts: A distressing number of students drop out and fail to graduate. An average of 30.1% of 8th graders failed to graduate[3] from state schools five years later during the period 1980-84, 30.2% during 1985-89, and 29.8% during 1990-94, 32.1% during 1995-99 (33.4% during 1997-99). During 1998-99, 93.1% of all who did graduate received the State High School Diploma, while 3.5% received a State Certificate for meeting the required Carnegie units but not passing the Exit Exam, and the remaining 3.4% received a District Certificate, given to school attendees who neither attained the required Carnegie units nor passed the Exit Exam.

Fortunately, many dropouts enroll in adult education programs and either earn a high school diploma or obtain a GED. During 1999, 2,637 Adult Education high school diplomas were awarded to school completers and 4,662 GEDs were awarded in the state. Over time, adult education high school diplomas and GEDs increase the effective school completion rate

substantially. In the 1990 Census, 19.1% of state resident 25 - 34 year-olds said they had not completed either high school or a GED: 17.5% of White males, 14.3% of White females, 29.4% of African-American and Other males, and 23.6% of African-American and Other females.

Achievement Summary: The numbers of students testing below basic on the PACT and dropping out range from 25.6% to 41.4%. Thus, far too many students fail to acquire the knowledge, skills, learning habits, and motivation necessary to compete in the economy or contribute to society in the 21st Century.

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Adolescent Risk Behaviors

Not in School or Employed: During 1990, 21,746 teenagers ages 16-19 were idle, meaning they neither worked nor were enrolled in school. Idle teens comprised 9.6% of their age group. The data reflect a serious failure in both school completion and the critical transition from school to work, significantly affecting their development as future workers. The rates of idleness among teens during 1990 were:

6.3% White Males	11.7% Af.Am. & Other Males
9.8% White Females	13.0% Af.Am. & Other Females

Sexual Activity and Pregnancy: Significant and increasing numbers of teenagers now engage in sexual activity. The Youth Risk Behavior Survey (YRBS) administered to a representative sample of high school students throughout South Carolina showed that sexual activity begins at an early age:16% of female and 30% of male students have engaged in intercourse by age 13; by age 15, 43% the females and 53% of males have engaged in sexual intercourse. Statewide, 49% of females and 48% of males in the 11th and 12th grades reported engaging in intercourse during the past three months. Furthermore, 22% of female and 32% of male 11th and 12th graders have had intercourse with four or more partners during their lifetimes.

Premature sexual activity often results in pregnancy. In the state, 4,274 girls between the ages of 14 and 17 became pregnant in 1998 and 4,128 in 1999. This represented 3.8% of all girls ages 14 - 17 in 1999; several times this percentage become pregnant at least once by age 18. The pregnancy rate for ages 14 - 17 was 2.8% for Whites and 5.3% for African-Americans and Others. Of all pregnancies of 14-17 year olds, 78.1% resulted in live births, with almost all other pregnancies ending in abortions.

Teen pregnancy rates increased substantially across the state during the 1980s; as a result, greater emphasis was devoted to prevention of teen pregnancy. Since 1989, the teen pregnancy rate in South Carolina has decreased by 31.9% .

Alcohol Use: In 1992-93, 20.8% of 7th and 8th graders and 37.4% of high schoolers said they had used alcohol in the past month. Of White males in grades 7 - 12, 36.1% had used it in the past month, compared with 30.0% of African-American males; likewise, 32.7% of White

females said they had used alcohol, compared with 21.2% of African-American females. Many youth first used alcohol at an early age. Among students 15 and older, 16.2% had used alcohol by age 11 or younger, 36.1% by age 13, and 58.3% by age 15.

During the previous year, 33.1% of 7th and 8th graders and 42.5% of high schoolers said they had ridden with a drinking driver. Of seniors who drive, 28.8% said they had driven after drinking, and 10.0% of seniors said they had attended school while under the influence of alcohol. Widespread use is encouraged by the ready availability and low perceived risk of alcohol. Among students who expressed an opinion, 58.2% of eighth graders and 87.2% of seniors felt that beer was easy to get; 50.9% of eighth graders and 48.5% of seniors felt there was not a great risk in using it regularly.

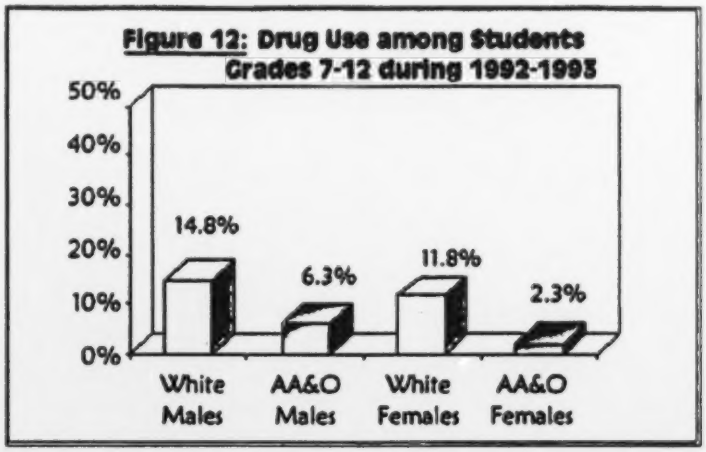
The statewide sample YRBS survey showed that the percentage of high school students drinking alcohol monthly has increased only slightly from 44% in 1993 to 45% in 1999. Statewide among these high school students, 54% of White males, 53% of White females, 38% of African-American males, and 32% of African-American females drank alcohol during a month in South Carolina.

Heavy Drinking: When asked how many drinks, if any, they usually consume, 28.1% of all students in grades 7 - 12 in 1992-93 responded 3 or more drinks at a time and 16.3% of reported frequently drinking 5 or more drinks. The YRBS indicates that statewide binge drinking among high school students remained at 25% between 1993 and 1999: 38% of White males, 31% of White females, 21% of African-American males, and 9% of African-American females.

Drugs: In 1992-93, 5.6% of 7th and 8th graders and 12.8% of high schoolers reported using illegal drugs during the previous month. Among students in grades 7 - 12, use was reported mostly by White males (14.8%) and White females (11.8%); use among African-American males was 6.3% and African-American females, 2.3%. Some young people first used drugs at an early age: among students 15 and older, 3.0% had experienced their first use by age 11 or sooner; 8.6% had used a drug by age 13, and 17.3% by age 15.

Of seniors who had started using marijuana, 9.7% began use at home, 44.1% at a friend's home, and 46.2% elsewhere. During the past year, 4.0% of all high school students said that they used marijuana at home, 9.2% at a friend's house, and 6.3% in a car. In the past year, 6.6% of all high school students who drive and 10.5% of seniors who drive said that they had driven after using drugs . Furthermore, 7.7% of high school seniors said that they had attended school while under the influence of drugs. Such use is encouraged by the ready availability of drugs: 28.3% of 8th graders who had an opinion said it is easy to get marijuana and 20.9% said it is easy to get cocaine or crack; 75.2% of seniors said it is easy to get marijuana and 59.8% said it was easy to get cocaine or crack.

The YRBS indicates that statewide drug use monthly among high school students has grown substantially since the 1992-93 survey. Monthly marijuana use by high school students statewide has increased 112% from 12.5% in 1993 to 26.5% in 1997, but declined slightly to 24.5% in 1999, still double the rate reflected in the 1992-93 survey: 27% of White males, 24% of White females, 29% of African-American males, and 16% of African-American females in South Carolina.



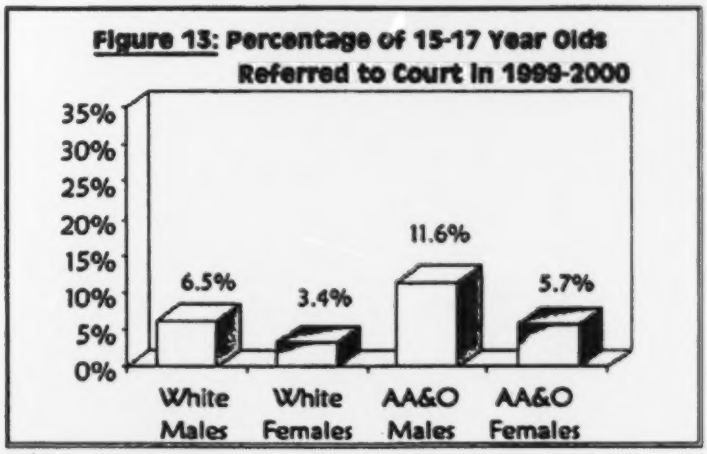
Juvenile Delinquency: In 1999-2000, 28,969 individual juvenile offenders in the state were referred to the Solicitor for delinquency; of these, 15.0% were age 12 or younger, 30.0% were 13 or 14, and 55.0% were 15 or older.

Of the referrals to the family court, 7.9% of all referrals were for violent and serious crimes which include drug trafficking, acts against persons for murder, rape, robbery, and aggravated assault, and serious property offenses for arson and burglary. Also, 4,451 juvenile cases constituting 15.4% of all referrals were for status offenses. Status offenses include truancy, running away, incorrigibility, and other offenses that would not be crimes for adults.

Delinquents are likely to live in families with low income: 27.8% lived in families with income under $10,000, 36.5% with $10,000-$19,999 and 35.7% with $20,000 or more. Furthermore, only 20.2% of delinquents lived with both natural parents, while 52.6% lived in a single parent household, 24.1% lived with other relatives, and 3.1% in other situations. Delinquency or criminal activity occurs among many related family members: 40.9% had at least one family member who was delinquent or had some criminal record.

Youth referred to the family courts are likely to have been there before. In 1999-2000, 62.2% had at least one prior referral and 36.4% had been referred to court 3 times or more. Many were referred at an early age. For delinquents 15 - 17 years old, 3.7% had been referred by the age of 10, 13.3% by the age of 12, and 37.7% by the age of 14.

During 1999-2000, 10,840 youth ages 15 to 17 were referred to the family courts. In the state, 6.4% of all youth 15 to 17 are referred to court in one year and roughly double that percentage are referred at least once by age 18. Furthermore, the National Youth Survey indicates that typically across the United States the proportion of youth engaging in crime is two or three times the number ever apprehended. In 1999-2000, there were 1,919 juvenile committed to DJJ custody and placed in residential programs.



Deaths: During 1994-98, 1,217 youth ages 15 to 19 died. Automobile accidents were the major cause, resulting in 533 deaths between 1994 and 1998; homicides killed 167 youth 15 to 19 years old during the five-year period. Alcohol use is often a significant factor in deaths among teenagers.

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Summary

Facing the Scope of Problems: The data on families, economic status, health, readiness, school achievement, and adolescent risk behaviors provide a troublesome picture of the condition of children in South Carolina. The 25.1% of children in single-parent families, 21.0% in poverty, 33.4% not graduating from school, 37.4% of high school students using alcohol and 19.6% using drugs each month, and other data profiled in this report suggest that too many children are at risk of not growing up to become self-supporting adults, good family members, and responsible community citizens.

Emphasizing the Positive: South Carolina Kids Count reports have been developed to describe the problems of children in each of the counties. Fortunately, the majority of children and youth are doing well, and some very well. One simple description is the percentage of children who do not fall into the problem categories reported. For the state, 84% of children are born to non-teen mothers ages 20 or older, 61.2% are born to married parents, and 74.9% lived in two-parent families; 79.0% were not poor and 53.7% lived in families with incomes above twice the poverty level for a family of three, $29,260 in 2001; 90.4% of babies were born with normal birthweights, 85.2% were assessed as ready for the first grade, 62.0% scored basic or better on PACT for 8th grade math and 64.9% for 8th grade reading, 66.3% passed all parts of the Exit Exam in the 10th grade, and 66.6% graduated with their class; in a typical month, 62.6% of high school students do not drink alcohol, 80.4% do not use drugs, and 69.2% do not smoke. Unfortunately, the absence of a problem is not always an indicator of success. Some data is available for exemplary performance: for example, 40.0% of 3rd graders and 23.5% of 8th graders scored proficient or advanced on PACT in reading and 25.4% of 3rd graders and 19.7% of 8th graders in math. Unfortunately, data on success is not

generally available.

Despite the limitations of success data,we must emphasize the positive in providing good support and appropriate influences for children and youth. Recent philosophy and publications such as those of the Search Institute (700 South Third Street, Suite 210, Minneapolis, MN, 55415-1138, tel. 1-800-888-7828), emphasize the critical importance of "developmental assets" to promote and support positive development. One short book from the Search Institute, (What Kids Need to Succeed, by Peter J. Benson, Judy Gailbraith, and Pamela Espeland, 1995) presents an excellent array of suggestions for promoting developmental assets through families, community, faith congregations, and schools. If each family, school, religious congregation and community organization assertively worked to build such assets, the problems described in this report would be reduced dramatically. Such positive family-school-community efforts could improve South Carolina's national Kids Count ranking from the bottom 10 to the average or even the top 10 by prevention of unnecessary problems affecting children and youth, as shown in the table for South Carolina on page 16.

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1. During this timeframe, the local Departments of Social Services in three counties (Spartanburg, Pickens, Charleston) were involved in a special project that piloted an alternative child protective services response system. The number of reports and cases reported here does not include the data from this special project.
2. Number is an unduplicated count for the entire fiscal year. The number and percentage cannot be compared to data in Kids Count 2000.
3. This is calculated, using 8th grade enrollment to 12th grade graduation data.

All data presented in this report is the most recent available at the date it goes to the publisher. Most census 2000 data will not be available until 2002. This version of the Kids Count report will be revised as more recent and additional data become available. Please send us your corrections and suggestions for improvement. We welcome your ideas for ways to make the state and county reports more useful and accurate. Please utilize local data sources whenever possible to supplement the profile provided through our report.

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